

225982

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET
NUMBER

2010 - 323 - 1

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

Gary B. Adams dba Palmetto Transportation

(Please type or print)

Submitted by: Gary B. Adams

Telephone:

843-683-4279

Address: 18 Bridle Path Lane

Fax:

Bluffton, S.C. 29910

Other:

Email:

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

☐ Application - Class A/A Restricted

☐ Application - Class C Taxi

☒ Application - Class C Charter

☐ Application - Class C Charter Bus

☐ Application - Class C Non-Emergency

☐ Application - Class C Stretcher Van

☐ Application - Class E Household Goods

☐ Application - Class E Hazardous Waste

☐ Application

☐ Request for Extension to Comply with Order

☐ Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded

☐ Request for Cancellation of Certificate

☐ Request for Suspension

☐ Request for Reinstatement

☐ Request for Name Change on Certificate

☐ Request to Amend Scope of Authority

☐ Request to Amend Tariff (rate increase, etc.)

☐ Request to Amend Passenger Limit

☐ Request

☐ Exhibit

☐ Late-Filed Exhibit

☐ Letter

☐ Proposed Order

☐ Publisher's Affidavit

☐ Reservation Letter

☐ Response

☐ Return to Petition

☐ Other:

RECEIVED
SEP 13 2010
PSC SC
CLERK'S OFFICE

RECEIVED
SEP 17 2010
PSC SC
CLERK'S OFFICE

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

Handwritten signature/initials.

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
101 Executive Center Drive, Suite 100
Columbia, South Carolina 29210
(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100 Fax: (803) 896-5199

**APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR
OPERATION OF MOTOR VEHICLE CARRIER**

Date: 8/14/10

CLASS C - CHARTER

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship with or without trade name.)

Gary B. Adams dba Palmetto Transportation
18 Bridle Path Lane
Street Address of Applicant

Bluffton, S.C. 29910
Mailing Address of Applicant if different from street address

Phone Fax

Email Address

2. If incorporated, a copy of Articles of Incorporation must be attached. (If incorporated outside of SC, attach SC Secretary of State "Foreign Corporation" Certificate.)

3. Select Entity Type: (Check one)

- ☒ Individual Owner/Sole Proprietorship
☐ Partnership - List names and address of all person having an interest in the business.
☐ Corporation - List names and addresses of two principal officers.

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

BALANCE SHEET

Balance at Time Application is Filed:

Month _____ Year _____

Assets:

Cash	5,000
Receivables	
Real Estate	
Buildings and Equipment (Net)	
Motor Vehicles (Net)	40,000
Garage Equipment (Net)	
Machinery and Tools (Net)	
Supplies on Hand	
Prepays and Other Assets	
Total Assets	45,000
<u>Liabilities and Equity:</u>	
Accounts Payable	
Notes Payable	
Mortgages Payable	
Equipment Obligations	
Accrued Salaries and Wages	
Other Accrued Obligations	
Other Liabilities <i>credit card balance</i>	43,000
Total Liabilities	
Capital Stock	
Retained Earnings	
Total Equity	
Total Liabilities and Equity	43,000

PROPOSED RATES AND CHARGES FOR SERVICE

Maximum Proposed Rates and Charges for Service are as follows:

\$75 to or from Savannah Airport fr. Hilton Head
\$12 to \$28 on Hilton Head Island

Counties to be Served:

Beaufort County
Jasper "
City of Savannah & Sav. Airport to & from

Maximum Number of Passengers per Vehicle:

Lincoln Town Car

5
4 passengers max.

DESCRIPTION OF EQUIPMENT

[illegible]

✓
INSURANCE QUOTE

This form **MUST BE COMPLETED AND SIGNED** by an **AUTHORIZED INSURANCE COMPANY REPRESENTATIVE**.

The following insurance quote is for: Bound Policy

Gary Adams DBA Palmetto Transportation

Name of Motor Carrier

18 Bridle Path Ln Bluffton, SC 29910

Address of Motor Carrier

Amount of Premium:

Limits Quoted: (See Below)

Liability Insurance \$ 2,159

Limits 1.5 million

The above quoted premium is for a term of 12 months.

Minimum Limits - Intrastate Only:

1-7 Passengers \$ 25,000/50,000/25,000

8-15 Passengers \$ 25,000/100,000/25,000

Delos Insurance Company

Name of Insurance Company

120 W. 45th Street 36 Floor New York, NY 10036

Home Office Address of Company

I am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

9-2-10

Date

Dale Schibe

Authorized Insurance Company Representative's Signature

The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested.

Exhibit FWA

Gary B. Adams dba Palmetto Transportation
Name of Applicant

1. Are there currently any outstanding judgments against the Applicant?

☐ Yes

☒ No

If Yes, indicate nature of judgement(s) against applicant.

2. Is Applicant familiar with all statutes and regulations, including safety regulations and governing for-hire motor carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations?

☒ Yes

☐ No

3. Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?

☒ Yes

☐ No

Exhibit on Driver Qualifications

1. Applicant understands that all drivers must be a minimum of 18 years of age.

☒ Yes

☐ No

2. Applicant understands that a certified copy of the driver's three (3) year driving record issued by the SC DMV and such record from the DMV of the state in which the driver is or has been domiciled for such period must be maintained in the Applicant's business office.

☒ Yes

☐ No

3. Applicant understands that a criminal history background check from the state where the driver currently lives must be maintained in the Applicant's business office.

☒ Yes

☐ No

4. Applicant understands that all drivers operating a vehicle under a Class C Charter Certificate must have in their possession when operating a charter vehicle, a valid driver's license issued by the SC DMV or the current state of residence of the driver.

☒ Yes

☐ No

5. Applicant understands that all Class C Charter Certificate holders are prohibited from employing or leasing vehicles to drivers who are registered, or required to be registered, as sex offenders with the South Carolina State Law Enforcement Division or any national registry of sex offenders.

☒ Yes

☐ No

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
POST OFFICE DRAWER 11649
COLUMBIA, SOUTH CAROLINA 29211

To: *Trisha DeShanty*

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq. (1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol.23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

STATE OF SOUTH CAROLINA

COUNTY OF

*Beaufort**Gary B. Adams*

Applicant's Signature

Gary B. Adams

owner

I, ~~*John L. Brooks*~~

Name of Applicant's Representative

~~*Notary Public for S.C.*~~

Title

of

Palmetto Transportation

Applicant

the Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

Gary B. Adams

Signature of Applicant's Representative

SWORN TO BEFORE ME
This *7* day of *September 20 10*

Notary Public

Commission Expires

May 21, 2017

STATE OF SOUTH CAROLINA
OFFICE OF REGULATORY STAFF
TRANSPORTATION DEPARTMENT

* IMPORTANT CHANGES TO DECAL APPLICATION PROCESS *

The Law requires that you secure licenses on or before July 1, 2009.
will begin July 1, 2009.

Enforcement for the period July 1, 2009 through December 31, 2009

UNLESS YOU COMPLY WITH THE MOTOR CARRIER LAWS OF SOUTH CAROLINA AND THE RULES AND REGULATIONS ISSUED THEREUNDER BEFORE JULY 1, 2009, A RULE TO SHOW CAUSE ORDER WILL BE ISSUED AND COULD RESULT IN REVOCATION OF YOUR OPERATING CERTIFICATE.

Your correct name is on the enclosed forms to assist you in ordering your Last-Half Year 2009 License Decals. If you need additional forms, please copy the form with the correct name and remit for each vehicle. To determine your license fee(s), use the empty weight of your vehicle listed on the title or registration card.

Please destroy old decal(s) once you have secured the decal(s) for the new period.

IMPORTANT CHANGE: License decals may be purchased by submitting a business and/or personal check, money order, certified/cashier check or cash. All checks must be made payable to the Office of Regulatory Staff.

All completed applications and applicable fees should be mailed to:

State of South Carolina
Office of Regulatory Staff
Transportation Department
1401 Main Street, Suite 900
Columbia, SC 29201

If you need assistance in completing your license decal application, please contact the Transportation Department at (803) 737-0800.

Thank you for ordering your license decal(s) before June 15, 2009.

STATE OF SOUTH CAROLINA OFFICE OF REGULATORY STAFF
TRANSPORTATION DEPARTMENT
1401 MAIN STREET, SUITE 900
COLUMBIA, S.C. 29201
(803) 737-0800

APPLICATION FOR LICENSE DECAL

INSTRUCTIONS:

1. Motor Vehicle Carrier license fees are due and payable semiannually on or before January 1 and July 1 of each year. **BUSINESS AND/OR PERSONAL CHECKS, CASH, MONEY ORDER, CERTIFIED, OR CASHIER'S CHECK MUST BE PAYABLE TO THE OFFICE OF REGULATORY STAFF.**
2. All licenses issued for the first-half year will expire June 30; all licenses issued for last-half year will expire December 31.
3. Type or write plainly any changes or corrections. Fill this form out completely or it may delay decal processing.
4. Mail completed application and applicable fees to: SC Office of Regulatory Staff, 1401 Main Street, Suite 900, Columbia, SC 29201.
5. **NEW REQUIREMENT FOR CLASS C CHARTER MOTOR CARRIERS:** You are **REQUIRED** to complete the Owner of Vehicle Information. Applications received without the required information may be returned unprocessed.

CLASS

C- Charter

Application is hereby made to the Office of Regulatory Staff of South Carolina, Columbia, SC, for license for the motor vehicle described in the following for the period ending _____

Certificate Holder:

GARY ADAMS

18 BRIDLE PATH LANE

Mailing Address

City, State and Zip Code

BLUFFTON, S.C. 29910

Telephone No.

☒ Owner of Vehicle

Street Address if Different From Mailing Address

GARY ADAMS

Name as Listed on the Title or Registration

City, State and Zip Code

Make of Vehicle

LINC.

Body Type

TOWN CAR 4door

VIN Number

625070

Year Model

2007 Town Car

VEHICLE IDENTIFICATION

Seating Capacity

4 + driver

Empty Weight

4200

FEE

\$

\$20.00

**** IMPORTANT **** A current annual report and required insurance documents must be on file with the Office of Regulatory Staff before any decal(s) will be issued.

**** FARES OR CHARGES (List maximum rates only; mandatory to receive decal)

\$75

APPLICANT'S SIGNATURE:

Gary Adams

STATE OF SOUTH CAROLINA
OFFICE OF REGULATORY STAFF
TRANSPORTATION DEPARTMENT

IMPORTANT CHANGES TO DECAL APPLICATION PROCESS

The Law requires that you secure licenses on or before January 1, 2009. Enforcement for the period January 1, 2009 through June 30, 2009 will begin January 1, 2009.

UNLESS YOU COMPLY WITH THE MOTOR CARRIER LAWS OF SOUTH CAROLINA AND THE RULES AND REGULATIONS ISSUED THEREUNDER BEFORE JANUARY 1, 2009, A RULE TO SHOW CAUSE ORDER WILL BE ISSUED AND COULD RESULT IN REVOCATION OF YOUR OPERATING CERTIFICATE.

Your correct name is on the enclosed forms to assist you in ordering your First-Half Year 2009 License Decals. If you need additional forms, please copy the form with the correct name and remit for each vehicle. To determine your license fee(s), use the empty weight of your vehicle listed on the title or registration card.

Please destroy old decal(s) once you have secured the decal(s) for the new period.

IMPORTANT CHANGE: License decals may be purchased by submitting a business and/or personal check, money order, certified/cashier check or cash. All checks must be made payable to the Office of Regulatory Staff.

All completed applications and applicable fees should be mailed to:

State of South Carolina
Office of Regulatory Staff
Transportation Department
1401 Main Street, Suite 900
Columbia, SC 29201

If you need assistance in completing your license decal application, please contact the Transportation Department at (803) 737-0800.

Thank you for ordering your license decal(s) before December 15, 2008.

STATE OF SOUTH CAROLINA OFFICE OF REGULATORY STAFF
TRANSPORTATION DEPARTMENT
1401 MAIN STREET, SUITE 900
COLUMBIA, S.C. 29201
(803) 737-0800

APPLICATION FOR LICENSE DECAL

INSTRUCTIONS:

- Motor Vehicle Carrier license fees are due and payable semiannually on or before January 1 and July 1 of each year. **BUSINESS AND/OR PERSONAL CHECKS, CASH, MONEY ORDER, CERTIFIED, OR CASHIER'S CHECK MUST BE PAYABLE TO THE OFFICE OF REGULATORY STAFF.**
- All licenses issued for the first-half year will expire June 30; all licenses issued for last-half year will expire December 31.
- Type or write plainly any changes or corrections. Fill this form out completely or it may delay decal processing.
- Mail completed application and applicable fees to: SC Office of Regulatory Staff, 1401 Main Street, Suite 900, Columbia, SC 29201.
- NEW REQUIREMENT FOR CLASS C CHARTER MOTOR CARRIERS:** You are REQUIRED to complete the Owner of Vehicle Information. Applications received without the required information may be returned unprocessed.

CLASS

C Charter Limousine

Application is hereby made to the Office of Regulatory Staff of South Carolina, Columbia, SC, for license for the motor vehicle described in the following for the period ending 12-31-10

Certificate Holder: GARY B. ADAMS dba Palmetto Transportation
(Exact Name of Certificate Holder)

18 BRIDLE PATH LANE

Mailing Address

BLUFFTON, S.C. 29910

City, State and Zip Code

843-683-4279

Telephone No.

Owner of Vehicle

GARY B. ADAMS

Name as Listed on the Title or Registration

Same

City, State and Zip Code

VEHICLE IDENTIFICATION

Make of Vehicle

LINC.

Seating Capacity

5

Body Type

Town Car

VIN Number

1LNHM81V07Y625070

Empty Weight

4200

Year Model

07

FEE

\$

\$20.00

**** IMPORTANT **** A current annual report and required insurance documents must be on file with the Office of Regulatory Staff before any decal(s) will be issued.

**** FARES OR CHARGES (List maximum rates only; mandatory to receive decal)

\$75

to or from Savannah Airport

APPLICANT'S SIGNATURE:

Gary B Adams